

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT R50	49607	8/15/00
I.P.E. CLASSIFIER			8/20/00
FAIRNESS REVIEW		04477	10-20-00
RESPONSE FAIRNESS REVIEW		04477	1-3-01

## **INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
— (Through numeral) Canceled A ..... Appeal  
÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
10	10	10	6/2/83
11	11	11	
12	12	12	
13	13	13	
14	14	14	
15	15	15	
16	16	16	
17	17	17	
18	18	18	
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20	20	20	
21	21	21	
22	22	22	
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24	24	24	
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Claim	Date
Final	
Original	10/11/62
51	✓
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Claim	Final	Original	Date
		101	6/1/63
		101	7/1/63
101			
102			
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106		0	
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If more than 150 claims or 10 actions  
start additional sheet here

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